Applicant:

Toru NODA et al.

Title:

STRATIFIED AIR-FUEL MIXTURE FORMING APPARATUS FOR INTERNAL

COMBUSTION ENGINE AND METHOD THEREOF

Appl. No.:

Unassigned

Filing Date:

MAR 1 6 2003

Examiner:

Unknown

Art Unit:

Unknown

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37°C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Toru NODA Isamu HOTTA Yasunori IWAKIRI Akihiko KAKUHO

Enclosed are:

- [X] Specification, Claim(s), and Abstract (18 pages).
- [X] Formal drawings (10 sheets, Figures 1-11).
- [X] Declaration and Power of Attorney (4 pages).
- [X] Preliminary Amendment.
- [X] Assignment of the invention to NISSAN MOTOR CO., LTD.
- [X] Assignment Recordation Cover Sheet.



- [X] Information Disclosure Statement.
- [X] Form PTO/SB/08 with copies of 4 listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).
- [X] Claim for Convention Priority with 1 certified Japanese priority document.

The filing fee is calculated below:

	Claims		Included		Extra	:	Rate		Fee
	as Filed		in		Claims		,		Totals
			Basic Fee						
Basic Fee							\$770.00	=	\$770.00
Total	15	-	20	=	0	X	\$18.00	=	\$0.00
Claims:									
Independents	2	-	3	=	0	X	\$86.00	=	\$0.00
:									·
If any Multiple Dependent Claim(s) present:						+	\$290.00	=	\$0.00
							SUBTOTAL:	=	\$770.00
[]		Sm	all Entity 1	Fees	Apply (subtra	act ½ of above):	=	\$0.00
					Τ	OTA	L FILING FEE:	=	\$770.00
Assignment Recordation Fee:					+	\$40.00	=	\$40.00	
TOTAL FEE								_ = `	\$810.00

- [X] A check in the amount of \$810.00 to cover the filing fee and fee for recordation of Assignment is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

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Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

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